PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

APO-8

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			6#				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			1 2 minus 20=		. 0			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		6		•	X40=	·	OR	X80=	
MUI	TIPLE DEPEN	DENT CLAIM P	RESENT	ESENT		Ø		+135=	135	OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							l	TOTAL	490	OR	TOTAL	
CLAIMS AS AMENDED - PART II									(70)	, ,	OTHER	
	, ci	(Column 1)	(Column 2) (Column 3)					SMALLE	NTITY	OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
IDME	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AMENDMENT	Independent	· ja in	Minus	***		п		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
								TOTAL			TOTAL	
			ADDIT. FEE			ADDIT. FEE						
		(Column 1)			umn 2) Heşt	(Column 3)	١.		400	(,	ADDI-
NT B		REMAINING AFTER AMENDMENT	4	PREV	MBER VIOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	TIONAL FEE
MENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
MEN	Independent		Minus	***	: A :	=		X40=	e ta consti	OR	X80=	. A
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							J	+135=		OR	+270=	
							:	TOTAL	T _{im}	OR	TOTAL	
			*	1				ADDIT. FEE			ADDIT. FE	} <u> </u>
		(Column 1)			umn 2)	(Column 3)	4			-		T 455:
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU PRE	IMBER VIOUSLY ID FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
OME	Total	· Harrie de		** .		=		X\$ 9=		OR	X\$18=	Ï
MEN	Indep ndent	•	Minus	***		=	1	X40=	·	OR	X80=	
K	FIRST PRES	ENTATION OF I	MULTIPLE D	EPENDE	NT CLAIM		_	+135=	.	1	070	
	16 Ab. a	uma tial as than	th entry in or	dumn 2 w	rite "0" in o	olumn 3.		+135=		OR	TOTA	
* If the entry in column 1 is I ss than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. ***If the "Highest Number Previously Paid For" IN THIS SPACE is I ss than 3, enter "3."								ADDIT. FEE		OR	ADDIT. FE	EL
1		umber Previously mber Pr viously						ound in the a	ppropriate b	ox in c	olumn 1.	